 	PATENT	ORD	43807-00/											
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	- EI	<u> </u>			R THAN	
T	TOTAL CLAIMS	S	20		1,5		1			FEE	OR 7		LENTITY	
Fſ	OR			NUMBER FILED		MBER EXTRA	1 1	BASIC F		385.00	, ,	RATE.	FEE 770.00	
T(OTAL CHARGE	EABLE CLAIMS	20 m	20 minus 20=			1 }	X\$ 9=	\dashv	383.55	┪┈		E 770.00	
INI	IDEPENDENT C	CLAIMS				• -				·	OB		 	
MI	ULTIPLE DEPE	ENDENT CLAIM P						X43=			OR	X86=	 	
• 14	f the different	o in column 1 is	Issa Abani					+145=		i	OR	+290=		
7	71.11	ce in column 1 is	•			column 2	_	TOTAL	1	385	OR	TOTAL		
٥	1.4105	CLAIMS AS A (Column 1)	MENDE					CHAI:	٠ -		•	OTHER		
A		CLAIMS REMAINING	T	(Colum	EST.	(Column 3)	ור	SMALL	_	ADDI-	OR 7	SMALL		
AMENDMENT A		AFTER AMENDMENT		PREVIOUS PAID F	DUSLY	PRESENT EXTRA	1	RATE		TIONAL FEE		RATE	ADDI- TIONAL FEE	
ON.	Total	1.00	Minus	-0	10	=		X\$ 9=			OR	X\$18=		
AM	Independent FIRST PRESE	ENTATION OF ML	Minus	PENDENT	3_	=	I	X43=	1		OR	X86=		
-	11101	INTATION OF THE	JUIPLE DE	PENDENT	CLAIM			+145=	†			+290=	 	
	•			,	•		_	TOTAL	-		OR	+29U= TOTAL		
_		(Column 1)		(Columi	m 2)	(Column 3)	AD	ADDIT, FEE OR ADDIT, FEE						
MENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE: NUMBE PREVIOU PAID FO	ST SER USLY	PRESENT EXTRA		RATE	П	ADDI- TONAL FEE		RATE	ADDI- TIONAL	
2	Total	• .	Minus	**		= '		X\$ 9=	T		OR	X\$18=	FEE	
- L	Independent		Minus	***			-	X43=	+					
1	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT C	LAIM				+		OR	X86=		
							L	+145=	T	(OR	+290=		
				•			ADI	TOTAL DIT. FEE			OR A	TOTAL ADDIT. FEE		
T	`	(Column 1) CLAIMS		(Column		(Column 3)					•			
,		REMAINING AFTER AMENDMENT	• •	NUMBE PREVIOUS PAID FO	ER JSLY	PRESENT EXTRA	F	RATE	TIC	NDDI- ONAL FEE		RATE	ADDI- TIONAL FEE	
<u> </u>			Minus	**		=	×	(\$ 9=			OR	X\$18=		
5 ⊢	Independent FIRST PRESEN		Minus ,	***		-	1,	K43=			∵ ` -	X86=		
Ľ	-IHST PRESER	NTATION OF MUL	TIPLE DEP	ENDENT C	LAIM		-				OR		<u>·</u>	
if t	the entry in colum	nn 1 is less than the		145=	L	C	OR L	+290=						
- n u	the "Highest Num the "Highest Num	mber Previously Paid mber Previously Paid	d For IN THIS	S SPACE is le	ess than	20, enter "20."	ADDI	TOTAL OIT. FEE	Ļ.		OR AD	TOTAL DDIT, FEE		
In	ie Highest Numr	ber Previously Paid I	For (Total or !	Independent)	is the t	nighest number fr	ound is	n the app	prop	riate box ir	n colur	nn 1.		